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12905 Jack Schwartz 245 Fifth Avenu New York, NY		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
						0 (3/1)	275 2005, on the ou	(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/590,307	10/590,307 06/27/2007		Edouard Francois		PF040033			7089
TITLE OF INVENTION ANALYSIS	N: METHOD OF ENC	ODING AND DECODI	NG AN IMAGE SEQ	UEN	ICE BY MEANS	OF HII	ERARCHICAL TEI	ИPORAL
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1740	\$300		\$0		\$2040	05/10/2012
EXAMINER		ART UNIT	CLASS-SUBCLASS					
FINDLEY, CHRISTOPHER G		2482	375-240110					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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Authorized Signature	Date April 10, 2012							
Typed or printed name Jack Schwartz				Registration No. 34,721				
submitting the complete this form and/or suggest Box 1450, Alexandria, Alexandria, Virginia 22:	ed application form to the ions for reducing this bu Virginia 22313-1450. DC 313-1450.	e USPTO. Time will var	y depending upon the i he Chief Information O COMPLETED FORM	indiv Office S TC	idual case. Any corr, U.S. Patent and This ADDRESS.	mments Tradema . SEND	on the amount of ti ark Office, U.S. Dep TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.